

John C. Lincoln Accountable Care Organization

Name and Location

John C. Lincoln Accountable Care Organization, LLC
2500 W. Utopia Road
Phoenix, AZ 85022

Accountable Care Organization (ACO) Primary Contact

James Dearing, DO
Chief Executive Officer and Chief Medical Officer
james.dearing@honorhealth.com
623-879-3823

Composition of ACO

Hospital employing ACO Professionals

ACO Participating Providers

The list of participating providers is available [here](#).

Organizational Information

The ACO's organizational chart and committee membership information is available [here](#).

ACO Quality Reporting

The goal of an ACO is to deliver seamless, high-quality care for Medicare beneficiaries. The John C. Lincoln ACO is a patient-centered organization where the patient and providers are true partners in care decisions. The ACO is responsible for maintaining a patient-centered focus and developing processes to:

- Promote evidence-based medicine
- Promote patient engagement
- Internally and publicly report on quality and cost
- Coordinate care

Quality Measures

To operate as a CMS-certified ACO, the John C. Lincoln ACO is required to demonstrate that it meets the required quality performance standard for that year.

Our Quality Reporting Scores for 2012, 2013 and 2014							
Measure Number	Performance Measure	2012 Reporting Period		2013 Reporting Period		2014 Reporting Period	
		ACO	Mean Performance Rate for All ACOs	ACO	Mean Performance Rate for All ACOs	ACO	Mean Performance Rate for All ACOs
ACO #1	Getting Timely Care, Appointments, and Information	Optional	Optional	Optional	Optional	74.71	80.13
ACO #2	How Well Your Doctors Communicates	Optional	Optional	Optional	Optional	90.65	92.39
ACO #3	Patients' Rating of Doctor	Optional	Optional	Optional	Optional	90.14	91.58
ACO #4	Access to Specialists	Optional	Optional	Optional	Optional	82.09	83.97
ACO #5	Health Promotion and Education	Optional	Optional	Optional	Optional	Optional	60.82
ACO #6	Shared Decision Making	Optional	Optional	Optional	Optional	Optional	71.26
ACO #7	Health Status/Functional Status	Optional	Optional	Optional	Optional	Optional	73.23
ACO #8	Risk Standardized, All Condition Readmissions	14.74	15.42	14.08	14.08	14.9	14.45
ACO #9	ASC Admissions: COPD or Asthma in Older Adults	0.63	1.13	1.03	1.03	1.17	0.67
ACO #10	ASC Admission : Heart Failure	1.34	1.09	1.44	1.44	1.2	1.15
ACO #11	Percent of PCPs who Qualified for EHR Incentive Payment	76.06%	59.87%	82.05%	82.05%	66.21%	86.42%
ACO #12	Medication Reconciliation	Optional	Optional	Optional	Optional	Optional	96.12
ACO #13	Falls: Screening for Fall Risk	Optional	Optional	Optional	Optional	Optional	44.68
ACO #14	Influenza Immunization	Optional	Optional	Optional	Optional	Optional	65.43
ACO #15	Pneumococcal Vaccination	Optional	Optional	Optional	Optional	Optional	68.3
ACO #16	Adult Weight Screening and Follow-up	Optional	Optional	Optional	Optional	Optional	76.47
ACO #17	Tobacco Use Assessment and Cessation Intervention	Optional	Optional	Optional	Optional	Optional	93.8
ACO #18	Depression Screening	Optional	Optional	Optional	Optional	Optional	69.67
ACO #19	Colorectal Cancer Screening	Optional	Optional	Optional	Optional	Optional	58.93
ACO #20	Mammography Screening	Optional	Optional	Optional	Optional	Optional	61.5
ACO #21	Proportion of Adults who had blood pressure	Optional	Optional	Optional	Optional	Optional	83.21

	screened in past 2 years						
ACO #22	Hemoglobin Ale Control (HbA1c) (<8 percent)	Optional	N/A	Optional	Optional	N/A	74.01
ACO #23	Low Density lipoprotein (LDL) (<100 mg/dl)	Optional	N/A	Optional	Optional	N/A	N/A
ACO #24	Blood Pressure (BP) <140/90	Optional	N/A	Optional	Optional	N/A	74.17
ACO #25	Tobacco Non Use	Optional	N/A	Optional	Optional	N/A	85.6
ACO #26	Aspirin Use	Optional	N/A	Optional	Optional	N/A	70.24
ACO #27	Percent of beneficiaries with diabetes whose HbA1c in poor control (>9 percent)	Optional	Optional	Optional	Optional	Optional	17.38
ACO #28	Percent of beneficiaries with hypertension whose BP <140/90	Optional	Optional	Optional	Optional	Optional	69.26
ACO #29	Percent of beneficiaries with IVD with complete lipid profile and LDL control<100mg/dl	Optional	Optional	Optional	Optional	Optional	N/A
ACO #30	Percent of beneficiaries with IVD who use Aspirin or other antithrombotic	Optional	Optional	Optional	Optional	Optional	75.44
ACO #31	Beta-Blocker Therapy for LVSD	Optional	Optional	Optional	Optional	96.43	82.71
ACO #32	Drug Therapy for lowering LDL Cholesterol	Optional	N/A	Optional	N/A	N/A	N/A
ACO #33	ACE Inhibitor or ARB Therapy for Patients with CAD and Diabetes and/or LVSD	Optional	N/A	Optional	N/A	63.33	N/A

Note: ASC =ambulatory sensitive conditions, COPO = chronic obstructive pulmonary disease, PCP= primary care physician, EHR = electronic health record, IVD=ischemicvascular disease, LVSD= leftventricular systolic dysfunction, ACE = angiotensin-converting enzyme, ARB = angiotensinreceptor blocker, CAD = coronary artery disease.

Aggregate Amount of Shared Savings/Losses

- Performance Year 1: \$0.00
- Performance Year 2: \$0.00
- Performance Year 3: TBD

How Shared Savings Are Distributed

The John C. Lincoln Accountable Care Organization is committed to incentive-driven performance and has designed the shared savings model to invest, on a phased-in basis, in provider incentives upon recovering any start-up and operating costs. After paying operating costs, including reimbursing participants and sponsors for any start-up and operating costs they incurred on behalf of John C. Lincoln Accountable Care Organization, the ACO will distribute 60 percent of the remaining total savings as follows:

- a. 50 percent to incentivize individual physicians.
- b. 30 percent to hospitals.
- c. 20 percent to other ACO providers/suppliers.

The remaining 40 percent of savings will be retained for investment in information and care coordination systems, or for additional provider incentives, as determined on an annual basis by the Governing Board.

Creating an Advance Directive

No one wants to think about the possibility of something bad happening to them or their loved ones. However, it's important to be prepared by having advance directives, which are documents such as a living will, medical and/or mental health power of attorney and pre-hospital do not resuscitate directive.

Have Questions? Need More Information?

Please visit Medicare's website or call 1-800-MEDICARE (1-800-633-4227). TIY users should call 1-877-486-2048.